



MIAMI-DADE COUNTY 2005 Annual Lobbyist Registration

Section 2-11.1(s), Code of Miami-Dade County, Florida

Type or Print in Ink

Date _____

Name of Lobbyist:

Mr/Ms Last Name First Name Mi.

Business/Firm Name

Address

City State Zip

Business Phone Fax E-Mail

OATH

I do solemnly swear that all facts contained in this Annual Registration report are true and correct, and that I have read and am familiar with the provisions contained in section 2-11.1(s) of the Code of Miami-Dade County as amended.

Signature of Lobbyist

State of _____, County of _____
Sworn to and subscribed before me this
_____ day of _____, 20____.

Notary Public in and for the State of _____ at Large
My commission expires:

(Notary Seal)

Deputy Clerk

For Office Use Only:

Registration Fee: **\$490.00 effective through 12/31/05**

Registration Fee Paid: ☐ Yes ☐ No ☐ Cash ☐ Check _____

Data Entry Date _____, 20____. Entered By _____